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## BIOTECHNOLOGY LAW GROUP

## Fax

**To:** EBC, COMMISSIONER FOR PATENTS  
Mail Stop EBC

**Fax:** 1-571-273-8300

**From:** Daniel M. Chambers

**Date:** 20 March 2006

**Phone:**

**Pages:** (2) Including cover

**Re:** Application Change of Address    Serial No: 10/530,736

**Urgent**     **For Action**     **Please Comment**     **Please Reply**     **Please Recycle**

Dear Sir,

I respectfully submit via facsimile transmission this cover sheet and a Change of Address Form (SB122) Request. Your prompt attention implementing the requested change is appreciated.

Thank you in advance for your assistance

Sincerely,



Daniel M. Chambers

**BioTechnology Law Group**

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7 Rec'd PTO/PTO 20 MAR 2006

PTO/SB/122 (10-01)

Approved for use through 10/31/2002. OMB 0651-0035

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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CHANGE OF  
CORRESPONDENCE ADDRESS  
*Application*

Address to: Mail Stop- EBC  
COMMISSIONER FOR PATENTS USPTO  
Washington, D.C. 20231

Application Number 10/530,736

Filing Date 10/10/2003

First Named Inventor Catherine A. Phillips,

Art Unit

Examiner Name

Attorney Docket Number VET-1030-US

Please change the Correspondence Address for the above-identified application  
to:



Customer Number

35938

Type Customer Number Here

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Number Bar Code  
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OR

Firm or  
Individual Name

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This form cannot be used to change the data associated with a Customer Number. To change the data associated with an existing Customer Number use "Request for Customer Number Data Change" (PTO/SB/124).

I am the :

- Applicant/Inventor.
- Assignee of record of the entire interest.
- Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).
- Attorney or Agent of record.
- Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number \_\_\_\_\_

Typed or Printed

Name Daniel M. Chambers

Reg. Num 34,561

Signature

Date

March 20, 2006

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

\*Total of \_\_\_\_\_ forms are submitted.

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.